

| AMENDMENT TRANSMITTAL LETTER | | | | ATTORNEY'S DOCKET NO.: 0045-1 | | |
|---|--|------------------------------------|---|--|-------------|--------------------------|
| SERIAL NUMBER: 10/077,521 | FILING DATE: February 15, 2002 | EXAMINER: Sharmila S. Gollamudi | GROUP ART UNIT: 1616 | | | |
| INVENTION: TOPICAL APPLICATION FOR TREATING TOENAIL FUNGUS | | | | RECEIVED CENTRAL FAX CENTER JUN 07 2004 | | |
| INVENTOR(s): James E. Brehove | | | | | | |
| TO THE ASSISTANT COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below. | | | | | | |
| CLAIMS AS AMENDED | | | | | | |
| (1) | (2) CLAIMS REMAINING AFTER AMENDMENT | (3) | (4) HIGHEST NUMBER PREVIOUSLY PAID FOR | (5) NO. OF EXTRA CLAIMS PRESENT | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | 2 | MINUS | 20 | 0 | X \$9 | 0.00 |
| INDEP. CLAIMS | 1 | MINUS | 3 | 0 | X \$43 | 0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | \$ 0.00 |
| <p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.</p> <p><input checked="" type="checkbox"/> No additional fee is required.</p> <p><input type="checkbox"/> Charge \$ _____ to Deposit Account No. _____. A triplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> The undersigned petitions for any extension of time for filing this document required under 37 C.F.R. 1.136. A check for \$ _____ to cover the fee is submitted herewith. _____.</p> <p><input type="checkbox"/> A triplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> Charge any additional fees to Deposit Account No. _____.</p> <p>_____ Date June 7, 2004</p> <p>_____ Signature Ernest D. Buff _____ Attorney Name _____ 25,833 _____ Reg. Number</p> <p>_____ Phone (908) 901-0220</p> | | | | | | |
| I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, PO Box 1450, Arlington, VA 22313-1450 via facsimile transmission number (703) 872-9306 on <u>June 7, 2004</u> . | | | | | | |
| <p>_____ (Signature) Ernest D. Buff _____ Attorney of Record _____ June 7, 2004 (Date)</p> | | | | | | |

Attorney Docket No.: 0045-1

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In re application of: James E. Brehove Group Art Unit: 3492
Serial No.: 10/077,521 Examiner: Sharmila S. Gollamudi
Filed: February 15, 2002
For: **TOPICAL APPLICATION FOR TREATING
TOENAIL FUNGUS**
Matter No.: 0045-1

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JUN 07 2004

231 Somerville Road
Bedminster, NJ 07921
June 7, 2004

FACSIMILE MAIL

Facsimile Mail To: (703) 872-9306

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT UNDER 37 C.F.R. § 1.116

In response to the Office Action dated March 17, 2004, kindly amend the
above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on
page 2 of this paper.

Remarks/Arguments begin on page 3 of this paper.